## Student Clubs and Organization External Private Event Fundraising Approval Form

<u>To Event Organizer:</u> The Office of Annual Giving needs to review and approve all private external fund raising events and activities to make sure they met the education-exemption criteria and make sure all policies and procedures are met.

The Internal Revenue Service (IRS) requires that specific disclosure language must be included on all materials promoting a fundraising event, and on tax receipts sent to donors. The Office of Advancement Services can assist you in creating this statement, which can vary for each event and is important for maintaining accurate gift records. Advancement Services can also assist in the appropriate cash handling and gift processing procedures for events.

Please submit this form to Office of Annual Giving (U-SU 102) prior to developing any materials to publicize, sell tickets for, or seek corporate sponsorships for a fundraising event or activity. All promotional materials will also require the approval of the Office of Communications and Public Affairs, prior to being printed or produced.

Student Club or Organization Information						
Name of Student Club or C	Organization:					
Type of Fundraising Event or Activity (If you are sending a letter, all correspondence need to be pre-approved)						
	Event Location:					
Contact Person:	Phone:					
Email Address:						
Advisor Name:	Email Address:					
Event Proceeds Will Benef	it:					
	support Student Clubs and Organizations that meet the ion Mission. Social clubs and activities are not included.					
It is important for us to d Cal State LA.	raw a connection between the donations our University receives and the goals of					
Purpose of Fund Raiser -	Does it meet any of our university strategic priority areas? (Check all that apply)					
Engagement, Servi	ce and the Public Good					
Student Success						
Welcoming and In	clusive Campus					

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Academic Distinction

Ha	as the Business or Company	y requested a Tax ID/W-9:	Yes No			
Na	me of Business:					
Co	ntact Name:	Phone Number:				
En	Email Address to Send Documentation:					
	<del>-</del>	ng event where you are charging please fill out this financial in	<del>-</del>			
A.	Ticket/Event Price:					
	(If more than one spon	sorship level, please attach a sh	eet with the details for a	each level.)		
B.	Goods and Services P	rovided:				
	Value of meal:					
	Value of additional goo	ods and/or services provided:				
	(e.g. concert, T-shirts,	mugs, pens, etc.)				
	Total value of goods a	ıd services provided:				
C.	v G	Net Tax Deductible Contribution:				
Fu Ple	e value of the goods and se undraising Policies ar ease read the following po sult in the donation being l	nd Procedures: licies and procedures thoroug	thly. Failure to follow	v these instructions may		
<ol> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	made payable to: Univer The memo section of the of the event, activity or of Check must be sent to: U Angeles, CA 90032. A g University with 5-10 day Once the check is received to proceed with the depo	final check from your vendorable they are sponsoring. Iniversity-Student Union, 515 ift receipt will be provided to	r or corporation spons 4 State University Dr the business or spons hization will notify Unight account.	sor must have the name rive Suite 306, Los sor on behalf of the niversity-Student Union		
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Director of Annual Giving			Date			
	rector of Advancement Se	ervices	 Date			

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